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CONFIRMATION NO. 3215

SERIAL NUMBER	FILING or 371(c) DATE RULE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.
10/085,411		348	2424	A-7295

APPLICANTS

Douglas Richard Luehrs, Atlanta, GA;

**** CONTINUING DATA *********** FOREIGN APPLICATIONS *********** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ****

03/20/2002

Foreign Priority claimed	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	STATE OR COUNTRY	SHEETS DRAWINGS	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119(a-d) conditions met	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Met after Allowance	GA	28	97

Verified and /TIMOTHY R NEWLIN/
Acknowledged Examiner's Signature _____ Initials _____

ADDRESS

SCIENTIFIC-ATLANTA, INC.
 INTELLECTUAL PROPERTY DEPARTMENT
 5030 SUGARLOAF PARKWAY
 LAWRENCEVILLE, GA 30044
 UNITED STATES

TITLE

Positive parental control

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